

## **Private Process Server Application Packet**

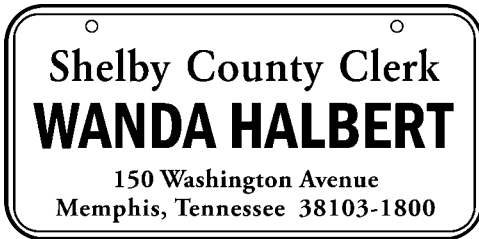
Anyone who wishes to serve process for Shelby County General Sessions Court may file a petition with the Shelby County Clerk. Petitioners must execute and file in the Shelby County Clerk's Office in Room 200 of 150 Washington Avenue the following:

1. Completed application
2. Background check release
3. Petition from five (5) attorneys
4. Proof of valid Memphis and/or Shelby County business license
5. Separate payments as follows:
  - \$45.00 payable to Shelby County Clerk
  - \$32.00 money order payable to Shelby County Sheriff's Department
  - \$20.65 payable online at [www.identogo.com](http://www.identogo.com) (instructions follow)
6. Upon approval you must bring a \$15,000.00 bond in order to receive your appointment and ID card.

## Fingerprint Instructions for TBI Background Check for Private Process Server – Shelby County

Follow the simple steps outlined below to complete the fingerprinting process:

1. Using your computer web browser, go to [www.identogo.com](http://www.identogo.com).
2. If you do not have access to the internet, you may call toll-free at (855) 226-2937 to schedule an appointment. If you call, you will be asked the following questions instead of completing these steps yourself.
3. Click Get Fingerprinted.
4. Select **Tennessee** under “Select a Fingerprinting Service by State” and click Go.
5. Under Enrollment Services select the Digital Fingerprinting option.
6. Choose the language you want (English or Spanish) and click on Schedule a New Appointment.
7. Select **Other** under Agency Name and click Go.
8. Select **Private Process Servers – Shelby Co** and click Go.
9. Enter ORI Number (**TN0790000**) and click Go.
10. You have selected to be fingerprinted for Private Process Servers – Shelby Co, click yes.
11. Select the location where you want to be fingerprinted. You may enter a zip code or choose a region of the state to get a list of locations in a specific area. Click Go.
12. Click on the words Click to Schedule across from the location you want, under the day you wish to be fingerprinted. If you want a date further in the future, click the Next Week >> link to display more dates. Once you select the location/date combination, select the time for your appointment and click Go.
13. Complete the Applicant Information page. Required fields are indicated by a red asterisk (\*). When complete, click Send Information.
14. Choose your payment option. Complete the payment process and click Send Payment Information.
15. Print your confirmation page.
16. Bring the approved identification documents with you to the appointment. These approved document options are identified on your confirmation of your appointment.
17. Arrive at the facility at your appointed date and time.
18. The Enrollment Officer at the site will check your ID, verify your information, verify or collect payment, capture your fingerprints, and submit your data. This normally takes less than five minutes.
19. You will receive a signed receipt at the end of your fingerprinting session which can be provided to your agency for proof of fingerprinting, if needed.
20. All results will be processed and delivered to your licensing agency for processing by the TBI. MorphoTrust USA is never in possession of criminal record data results.



**SHELBY COUNTY CLERK'S OFFICE**  
**WANDA HALBERT, COUNTY CLERK**  
**PRIVATE PROCESS SERVER**  
150 WASHINGTON AVE. • SUITE 201 • MEMPHIS, TN 38103  
PHONE (901) 222-3043 • FAX (901) 222-3037

## **AFFIDAVIT**

I, \_\_\_\_\_, being first duly sworn make oath as follows:

I, the affiant herein practice law before the General Sessions Court of Shelby County.

I, the affiant herein certify that on occasion, am unable to obtain reasonable and prompt service of process in causes of action brought before the courts of General Sessions.

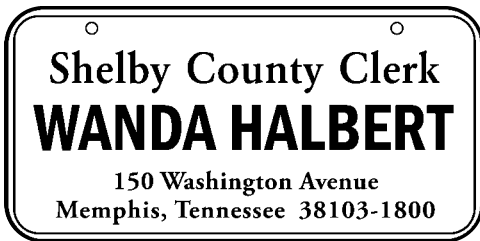
I, the affiant further state that reasonable and cost efficient access to the courts could and would be facilitated by appointment of \_\_\_\_\_ as Private Process Server pursuant to T.C.A. 8-8-108.

\_\_\_\_\_  
Affiant

Sworn and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My Commission Expires:

\_\_\_\_\_  
Notary Public



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**APPLICATION FOR PRIVATE PROCESS SERVER**

**IMPORTANT:** Any false statements made on this application shall be grounds for rejection of this application or for immediate and permanent revocation of any Private Process Server authority issued pursuant to this application.

Date Received\_\_\_\_\_

PPS Number\_\_\_\_\_

Rec Number\_\_\_\_\_

NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Previous Resi. Addr.: \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_  
.....

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Employed From \_\_\_\_\_ Title: \_\_\_\_\_

Other Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Employed From \_\_\_\_\_ Title: \_\_\_\_\_

Prev. Emp.: \_\_\_\_\_ Addr.: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Prev. Emp.: \_\_\_\_\_ Addr.: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
.....

U.S. Citizen: Yes\_\_\_ No\_\_\_ Naturalized: \_\_\_ / \_\_\_ / \_\_\_ TN Resident: Yes\_\_\_ No\_\_\_ How Long? \_\_\_\_\_

Married: Yes\_\_\_ No\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_ / \_\_\_ / \_\_\_ Place of Birth: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

SS# \_\_\_\_\_ - \_\_\_\_\_ Driver's License # \_\_\_\_\_ State: \_\_\_\_\_

**(Private Process Application - Page Two)**

Give five personal references who have know you for at least five years. Do not include relatives.

1.	_____	_____	_____	_____
	(Name)	(Street)	(City/State/Zip)	Phone: Work/Home
2.	_____	_____	_____	_____
	(Name)	(Street)	(City/State/Zip)	Phone: Work/Home
3.	_____	_____	_____	_____
	(Name)	(Street)	(City/State/Zip)	Phone: Work/Home
4.	_____	_____	_____	_____
	(Name)	(Street)	(City/State/Zip)	Phone: Work/Home
5.	_____	_____	_____	_____
	(Name)	(Street)	(City/State/Zip)	Phone: Work/Home

**EDUCATION**

Elementary School: \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

High School: \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_ Graduate? \_\_\_\_\_

Tech. School/College \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_ Graduate? \_\_\_\_\_

**MEDICAL**

Have you ever been under a doctor's care for a nervous or mental disorder? \_\_\_\_\_

If yes, name of doctor \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_ Place: \_\_\_\_\_

To what extent do you drink alcoholic beverages? \_\_\_\_\_

**(Private Process Application - Page Three)**

Have you had work experience with a city, state or federal law enforcement agency?\_\_\_\_\_

Agency:\_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Do you have current commission with any law enforcement agency?

Agency:\_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you had previous experience with an investigative agency or guard service?

Agency:\_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you ever been fingerprinted by a law enforcement agency?

Agency:\_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you ever been convicted or plead guilty to a felony charge? Yes\_\_\_\_ No\_\_\_\_

Date	Offense	City & State	Disposition
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Date	Offense	City & State	Disposition
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Date	Offense	City & State	Disposition
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List three (3) business firms as credit references:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**ATTACH PHOTO HERE**

**PLEASE READ BEFORE SIGNING**

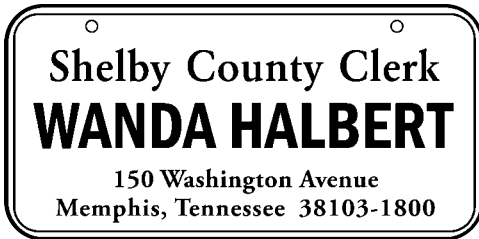
I hereby state that the information entered here is complete and true to the best of my knowledge. Any false statement, knowingly or willfully made will be reason to reject my application. I further agree to abide by the court rules and laws governing private process servers. This signature is to authorize a complete background investigation.

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Signature

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Date



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**SHELBY COUNTY CLERKS OFFICE**

**PRIVATE PROCESS SERVER APPLICANT'S  
AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION**

I, \_\_\_\_\_, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Shelby County Clerk's office whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration, employment and pre-employment records.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for issuance of authority for me to act as a private process server. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I also agree to pre-pay any and all charges or fees concerning this request and can be billed for such charges at the below listed address.

All background information obtained pursuant to this release will be strictly confidential and will not be released to unauthorized persons. The background files will be maintained by the Shelby County Sheriff's Department and will be released only to the Shelby County Clerk and only then for the purpose of their acting upon applications for private process serving authority or when the clerk may be considering revocation or suspension of that authority.

\_\_\_\_\_  
SIGNATURE (including maiden name)

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

DOB: \_\_\_\_\_

SSN: \_\_\_\_\_

\_\_\_\_\_  
WITNESS: